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January 8, 2008

To whom this may concern,

I have been asked to write this letter by my friend and long time patient, Christopher Colombo. Chris has requested that I record the details of his hardship suffered as a result of an infection. This infection was first diagnosed on July 19, 2006. On that day Chris was admitted to Arden Hill hospital in Goshen, N.Y. The ailment started in Chris' left ankle and appeared to result from an overly tight house arrest monitoring bracelet.

Chris remained in the hospital until July 25, 2006 and was seen by several specialists. His recovery was not complete at the time of discharge but it was felt that his treatment could be continued as an outpatient.

Once discharged in late July Chris pursued more specialized treatment with several physicians in Manhattan. Although I did not receive formal reports from these specialists, I was kept informed about his progress.

Chris developed a "drop foot" during his hospitalization and continues to suffer with many debilitating symptoms. These problems include paresthesias (numbness and tingling) of the left dorsal foot, weakness in dorsiflexion affecting his gait and chronic pain. Chris must continue to work hard with a physical therapist to maintain the function that he has.

I hope this detailed record of these events is helpful. Please do not hesitate to contact me regarding this case.

Thank you,

Dr. Arthur Klein D.O.

**DENNIS MILLER, M. D.**

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August 29, 2006

Neil Roth, M.D.  
130 East 77th Street, 8th Floor  
New York, New York 10021

Re: Chris Colombo

Dear Neil:

I am writing to you regarding your patient, Chris Colombo, whom you referred to me for an infectious disease consultation.

He is a forty-four year old male who states that he is generally in good health. He does not have any chronic medical problems. He is not currently on any medications, except for the antibiotics he is on. He is not allergic to any medications. He smokes about two cigarettes a day and drinks occasionally. He lives in Blooming Grove, New York.

Of note is the fact that he does have a history of Lyme disease, for which he says he has been treated. The details of this are unclear, although he says he is sure he does not have Lyme disease and he has received a variety of medicines for this. He is actually not in my office for this issue.

Apparently, he has a history of a left foot drop, and he says it is not clear what the etiology of this is and that he is seeing you for this problem. He had been wearing a bracelet on his left ankle, which was too tight, and he subsequently developed a cellulitis and was hospitalized at a local hospital upstate. He was there for about ten days and was discharged on Clindamycin, which he says upset his stomach. He saw you recently for recurrent cellulitis of the foot. Based on a conversation you and I had on the phone, he was placed on Bactrim Double-Strength twice a day, and he says he is much better now. He says the redness and swelling have resolved.

Re: Chris Colombo

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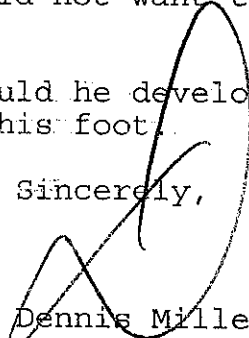
August 29, 2006

Physical examination reveals a male in no acute distress. He is afebrile. Examination of the left foot reveals that there is no redness, swelling or tenderness. There are no cuts, bruises or abrasions. The bracelet he was wearing on his left ankle is not present. He has a bracelet on the right ankle now, which he says is looser than it was on the left ankle.

My impression is that the patient most likely had a cellulitis, perhaps due to MRSA, based on his response to Bactrim and lack of clear response to Clindamycin. I advised him to take one more week of Bactrim, which he appears to be tolerating well. He says he had a bone scan done upstate, which was normal, although I do not actually have a copy of this. I called his primary doctor, Dr. Klein, to get the results. I have not heard back from him. I tried to pursue the issue of whether Lyme disease may be causing his foot drop, but the patient did not really want to discuss this. He said he was sure this is not related to Lyme disease and did not want to discuss it any further.

I told the patient to call me should he develop any recurrent redness or swelling of his foot.

Sincerely,



Dennis Miller, M.D.

DM/sf

cc: Lon Weiner, M.D.

**DENNIS MILLER, M.D.**